Case 1:25-cv-01115-RPK-JRC Filed 04/01/25 Document 7

USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF Charles Saldarriaga					COURT CASE NUMBER 1:25-cv-01115-RPK-JRC				
DEFENDANT						TYPE OF PROCESS			
The City of New York et al						o, s, c			
<u>-</u>	VIDIIAI COM	PANY CORI	PORATION ETC	TO SERVE OR DE		ON OF PROPERTY TO	O SEIZE OR COND	DEMN	
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SERVE Officer Mohan									
37-05 Union S	-			•					
				SS BELOW	T	h	T:		
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW					Number of process to be served with this Form 285		3		
PRO SE Charle	s Saldarria	าตล							
PRO SE Charles Saldarriaga 1-20 Astoria Blvd.						ber of parties to be ed in this case	5		
Apt. 4H					Served in this case				
Apt. 4H Astoria, NY 11102					Check for service				
					on U.S.A.				
SPECIAL INSTRUCTIONS OR O	THER INFORM	ATION THA	T WILL ASSIST	IN EXPEDITING SI	ERVICE (Include Business and A	<u> Alternate Addresses.</u>	L	
All Telephone Numbers, and Estim	ated Times Ava	ilable for Ser	vice):			IN CLEE	LED	Fold	
<u> </u>						U.S. DISTRIC	RK'S OFFICE T COURT E.D.N	1 Y	
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						× AIN (U 1 2025	*	
							YN OFFICE		
Signature of Attorney other Originat	or requesting ser	rvice on behalf	f of:	PLAINTIFF	TELEPHO	ONE NUMBER	DATE		
V. Martinez Defendan					(718) 613-2610 3/10/25				
SPACE BELOW FOR	R USE OF	U.S. MA	RSHAL O	NLY DO N	OT W	RITE BELOW	THIS LINE		
acknowledge receipt for the total	Total Process	District of	District to			AS Deputy or Clerk	Date		
number of process indicated. (Sign only for USM 285 if more		Origin	Serve	0,				_	
than one USM 285 is submitted)		No.DO	No. 53	(3/ P)	200	reix	<u> </u>	415	
I hereby certify and return that I	have personally	served, h	ave legal evidence	e of service, have	e executed	as shown in "Remarks oration, etc. shown at the	s", the process descr he address inserted b	ibed below.	
I hereby certify and return that									
Name and title of individual served						A person of suit	able age and discret	ion	
	•	,				then residing in	defendant's usual pl		
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Address (complete only different tha	n shown above)					Date	Time	□jan	
						3/27/26	6:10	pn 🗹	
						Signature of U.S. M	arshal or Deputy	-32	
Service Fee Total Mileage C including endean		ding Fee	Total Charges	Advance Deposits		int owed to U.S. Marsh unt of Refund*)	nal* or		
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REMARKS: DESK SG1 109th Satelitte	at Po	lice Ac	ademy.	HUBB	ARD	# 35	80		
DDIN'T S CODIES. 1. CLERK O						DRIOR	EDITIONS MAY B	ETICE	

- 2. USMS RECORD
 3. NOTICE OF SERVICE
- 4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal. 5. ACKNOWLEDGMENT OF RECEIPT

USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

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PLAINTIFF Charles Saldarriaga				l l	urt case numb 5-cv-01115-RPF		
DEFENDANT					PE OF PROCESS		<u> </u>
The City of New York et al	O, S, C						
▼	IDUAL, COMPANY, CORPO	DRATION. ETC.	TO SERVE OR DE	SCRIPTION	OF PROPERTY TO	O SEIZE OR CO	NDEMN
	ardo Moscoso, NYPD 1						
AT ADDRESS (Street of	or RFD, Apartment No., City,		ode)				
•	Blvd Astoria, NY 11103					•	
END NOTICE OF SERVICE COPY	Number of process to be						
		••••••		·· served w	ith this Form 285	3	
PRO SE Charles	Saldarriaga			Number	of parties to be		
1-20 Astoria Blv	served in this case		5				
Apt. 4H				Charle 6	or service		
Astoria, NY 111	02			on U.S.	۸.		
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				E	BROOKLYN	OFFICE	
Signature of Attorney other Originator	requesting service on behalf	of: 😰	PLAINTIFF	TELEPHONE	NUMBER	DATE	
			PLAINTIFF			1	
	ima		DEFENDANT	(718) 613	3-2610	3/10/25	
V. Marx	LICE OF HE MAI	Ō	DEFENDANT	<u></u>			JR.
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PRINT 5 COPIES:

- 1. CLERK OF THE COURT 2. USMS RECORD
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 5. ACKNOWLEDGMENT OF RECEIPT